POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	MTB	054	6/1/01
RESPONSE FORMALITY REVIEW	/B	1127	01/18/02

INDEX OF CLAIMS

✓ .... Rejected	N .... Non-elected
⚌ .... Allowed	I .... Interference
– (Through numeral)... Canceled	A .... Appeal
÷ .... Restricted	O .... Objected

Claim		Date							
Final	Original	7/4/13	4/02						
	1	✓	✓						
	2	✓							
	3	✓							
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If more than 150 claims or 10 actions
staple additional sheet here

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